



## PART B - FEE(S) TRANSMITTAL

SL 1/2

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7590

06/27/2002

STEPHEN R MAY  
INTELLECTUAL PROPERTY SERVICES  
BATTELLE MEMORIAL INSTITUTE  
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RICHLAND, WA 99352

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Rebecca B. Rupp	(Depositor's name)
<i>Rebecca B. Rupp</i>	(Signature)
September 27, 2002	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/375,614	08/17/1999	ANNA LEE Y. TONKOVICH	B-1479	5345

TITLE OF INVENTION: CHEMICAL REACTOR AND METHOD FOR GAS PHASE REACTANT CATALYTIC REACTIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	XXBXX No	XXXXX \$1280	\$0	XXXXX \$1280	09/27/2002
EXAMINER LANGEL, WAYNE A		ART UNIT 1754	CLASS-SUBCLASS 208-108000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Stephen R. May  
2. Frank S. Rosenberg  
3. \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Battelle Memorial Institute

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Richland, WA 99352

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies 18

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-1275 (enclose an extra copy of this form).

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01 FC:142  
02 FC:3611280.00 CH  
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